



WE ARE ISO 9001:2015 CERTIFIED

APPLICATION TO OPEN A WEKEZA SCHEME ACCOUNT

This is to request you to open a Wekeza Scheme account with the following particulars:

SECTION	REQUIREMENTS	DETAILS
Section 1	Full Names	
Section 2	ID/Passport Number	
Section 3	Postal Address	
Section 4	Email Address	
Section 5	Mobile No	
Section 6	Amount KSh.	
Section 7	Amount in words	
Section 8	Period(Days)	
Section 9	Maturity date	
Section 10	Maturity Instructions (Tick Where necessary)	On Maturity, Please; <input type="checkbox"/> Renew the principal amount for a similar term at the prevailing market rates and credit the net interest to my bank account per Section 11 <input type="checkbox"/> Renew the principal amount together with the interest for a similar term at the prevailing rates of interest <input type="checkbox"/> Liquidate the deposit with the Interest and credit my Bank account as per Section 11 <input type="checkbox"/> Liquidate the deposit with the Interest and credit my Savings account below; <input type="checkbox"/> Little angels <input type="checkbox"/> Holiday Savings <input type="checkbox"/> Deposits
Section 11	Bank Details	BANK ACCOUNT NUMBER: BANK NAME & BRANCH:

NB: All deposits including those that are automatically renewable are subject to The Unclaimed Financial Asses Act, 2011 and may be presumed abandoned unless within seven years after the expiration of its initial time period the owner consents to the renewal at or about the time of renewal by communicating in writing with the Sacco.

I confirm that all the above details are correct and agree to the terms and conditions.

Name **Signature**.....**Date**

FOR OFFICIAL USE ONLY

Account Number *Interest rate (per annum)*

Maturity Date *Receipt Number/Confirmation of funds*

Authorised Signatory

Name..... *Signature*..... *Date*